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1290-0 133-0	READ AMENDMENTS ON THIS RECO	7 7	A.F.	OF يا	WEDICAL TO THE TRANSPORT OF THE TRANSPOR	19. WAS AUTOPSY PERFORMED? YES NO 25  20c. TIME OF HOUSE AT WHILE AT WOR NOT WHILE AT  21. I attended the d Ceath occurred  22a. SIGNATURE	itions, if am gave rise cause (ig the under cause last last last last last last last last	POR SIGNIFIC RECORDING TO THE PORT OF THE	DUE TO (b) DUE TO (c) DUE TO (c) ICANT CC ICANT CC SUICIDE SUICIDE General Control General Con	OF INJUITAGE HOME	IRY (e.g., Irreet, official)	in or abo	but home, etc.)  5-6-  m on the MD  GERY OR CRI	20f. CI 63 he date 22b. 1 temato	ITY, TOWN stated abo ADDRESS 515	N, OR LO	OCATION  ast saw him to the bes  el. C. LOCATION	malive onst of my kno	COUNTY CO	deceased a a pregna fes   Grant III	was fancy in I	emale was as 90 days.  Unknown 18.)  STATE  ATE SIGNED 3-63

(Licensed Embalmer's Statement on Reverse Side)

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

## STATEMENT BY LICENSED EMBALMER

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dent	Signature of Student	Embalmer	Signed Ook	win	Vilka	
		,		Licensed Em	balmer No. 41	3/
<b>3</b> 35		, <sub>.</sub>		P.O. Addre	. Rienas Cil	1- M